Form Approved PERMITTEE NAME/ADDRESS (Include NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) Facility Name /Location if different) DISCHARGE MONITORING REPORT (DMR) OMB No. 2040-0004 (2-16)(17-19)NAME CYPALS THOMPSON CREEK MINING (Expires 2-29-84 ADDRESS - BOX 62 PERMIT NUMBER DISCHARGE NUMBER CLAYTUN MONITORING PERIOD FACILITY YEAR MO DAY YEAR DAY FROM TO LOCATION 88 31 NOTE: Read instructions before completing this form. (22-23) (24-25) (26-27) (28-29) (30-31) QUALITY OR CONCENTRATION EPA-REGION (3 Card Only) QUANTITY OR LOADING (4 Card Only) FREQUENCY SAMPLE (46-53) (54-61) (38-45) (46-53) (54-61) NO. PARAMETER OF EX TYPE (32-37)AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS (62-63)(64-68) (69-70)SAMPLE MEASUREMENT 7 50 PERMIT 9.00 REQUIREMENT ESTURNIT CODES MALL EDERGRADE ROSE ROSE AND RESIDENCE AND ADDRESS. SECTION SECTION SOLIOS. TOTAL SAMPLE MEASUREMENT Compared to the contract of PERMIT REQUIREMENT FEI HEMT GROSS VALL district a set stable STATE STATE STATE LOW IN COMPUTT OR SAMPLE MEASUREMENT 0.472 TREATMENT PLAN PERMIT REQUIREMENT FELDENT GROSS VALU MIGO SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Patrick H. Fiich
Vice President & General Man
Typed OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN. AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE. ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. INCLUDING THE POSSIBLITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. \$ 1001 AND 33 U.S.C. \$ 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE

TELEPHONE DATE

208 838-220 88 06 15

AREA NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REQUIREMENT

NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE POAM IN OTHER THAN TRACE AMOUNTS.

Facility Name /Location if different) DISCHARGE MONITORING REPORT (DMR) OMB No. 2040-0004 NAME CYPRUS THOMPSON CREEK MINING ((17-19)Expires 2-29-84 ADDRESS # 1 6 2 X 62 PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD FACILITY YEAR DAY YEAR MO DAY FROM TO MAJURVATER COMPLIANCE SECT LOCATION NOTE: Read instructions before completing this form. (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) ATTN: BERT DOUGHTY. ENVERON. QUANTITY OR LOADING (4 Card Only) QUALITY OR CONCENTRATION (3 Card Only) FREQUENCY SAMPLE PARAMETER (46-53) (54-61) (38-45)(46-53) (54-61) OF ANALYSIS EX TYPE (32-37)UNITS UNITS AVERAGE MAXIMUM MINIMUM AVERAGE MAXIMUM 62-63) (64-68) (69-70) SAMPLE MEASUREMENT 7.8 DEED CO I O W. ... PERMIT REQUIREMENT FFLUENT GROSS VALU MANUSCRIPTION AND alcale six six six six six SOLIDS, TOTAL SAMPLE MEASUREMENT 1.5 Manager . PERMIT REQUIREMENT FELUENT GROSS VALU DESCRIPTION OF THE PROPERTY OF the side of the side of **泰黎泰泰泰黎** 本华和斯森市 IN CONDUIT OR SAMPLE MEASUREMENT 0.579 0.763 PERMIT REQUIREMENT FFLUENT GROSS VALU HATEY AV SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED TELEPHONE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER DATE AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN: AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR Patrick H. Fitch OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIG-Vice President and General NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. \$ 1001 AND SIGNATURE OF PRINCIPAL EXECUTIVE 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.) AREA OFFICER OR AUTHORIZED AGENT NUMBER TYPED OR PRINTED YEAR MO DAY COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

UNTIL SUPPLY IS EXHAUSTED

PERMITTEE NAME/ADDRESS (Include

Form Approved